



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>Application Number</b>	10/536,659		
	<b>Filing Date</b>	November 23, 2005	
	<b>First Named Inventor</b>	Clarke et al.	
	<b>Group Art Unit</b>	1797	
	<b>Examiner Name</b>	Greene, Jason M.	
<b>Total Number of Pages in This Submission</b>	20	<b>Attorney Docket Number</b>	D-3212

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<b>Remarks</b>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm Name</b>	Stout, Uxa, Buyan & Mullins, LLP		
<b>Signature</b>			
<b>Printed Name</b>	Frank J. Uxa		
<b>Date</b>	10/22/08	<b>Reg. No.</b>	25,612

## CERTIFICATE OF TRANSMISSION/MAILING

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<b>Signature</b>			
<b>Typed or printed name</b>	Alicia Curran	<b>Date</b>	10/22/08

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<p>Fees Pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).</p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p>		<p><b>Complete if Known</b></p> <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width: 50%;">Application Number</td><td>10/536,659</td></tr><tr><td>Filing Date</td><td>November 23, 2005</td></tr><tr><td>First Named Inventor</td><td>CLARKE ET AL.</td></tr><tr><td>Examiner Name</td><td>Greene, Jason M.</td></tr><tr><td>Art Unit</td><td>1797</td></tr><tr><td>Attorney Docket No.</td><td>D-3212</td></tr></table>		Application Number	10/536,659	Filing Date	November 23, 2005	First Named Inventor	CLARKE ET AL.	Examiner Name	Greene, Jason M.	Art Unit	1797	Attorney Docket No.	D-3212																																																		
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<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number <u>21-0890</u> Deposit Account Name <u>Frank J. Uxa</u>																																																																	
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																																																																	
<b>FEE CALCULATION</b>																																																																	
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																																																																	
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If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																																																	
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Name (Print/Type)		Registration No. (Attorney/Agent)	Telephone																																																														
Frank J. Uxa		25,612	949-450-1750																																																														
Signature		Date																																																															
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